

<i>SERFF Tracking Number:</i>	<i>MUTA-126851527</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Mutual of Omaha Insurance Company</i>	<i>State Tracking Number:</i>	<i>47003</i>
<i>Company Tracking Number:</i>	<i>LORI CWACH</i>		
<i>TOI:</i>	<i>MS02I Individual Medicare Supplement - Pre-Standardized</i>	<i>Sub-TOI:</i>	<i>MS02I.000 Medicare Supplement - Pre-Standardized</i>
<i>Product Name:</i>	<i>2011 MOO PreStandardized Med Supp</i>		
<i>Project Name/Number:</i>	<i>2011 Annual Rate Filing/2011 MOO</i>		

## Filing at a Glance

Company: Mutual of Omaha Insurance Company

Product Name: 2011 MOO PreStandardized Med Supp      SERFF Tr Num: MUTA-126851527      State: Arkansas

TOI: MS02I Individual Medicare Supplement - Pre-Standardized      SERFF Status: Closed-Approved- Closed      State Tr Num: 47003

Sub-TOI: MS02I.000 Medicare Supplement - Pre-Standardized      Co Tr Num: LORI CWACH      State Status: Approved-Closed

Filing Type: Rate	Author: Lori Cwach	Reviewer(s): Stephanie Fowler
	Date Submitted: 10/07/2010	Disposition Date: 10/15/2010
		Disposition Status: Approved-Closed

Implementation Date Requested: 03/01/2011

Implementation Date: 03/01/2011

State Filing Description:

## General Information

Project Name: 2011 Annual Rate Filing  
 Project Number: 2011 MOO  
 Requested Filing Mode: Review & Approval  
 Explanation for Combination/Other:  
 Submission Type: New Submission  
 Overall Rate Impact: 10%  
 Filing Status Changed: 10/15/2010

Status of Filing in Domicile: Pending  
 Date Approved in Domicile:  
 Domicile Status Comments:  
 Market Type: Individual  
 Group Market Size:  
 Group Market Type:  
 Explanation for Other Group Market Type:  
 State Status Changed: 10/15/2010  
 Created By: Lori Cwach  
 Corresponding Filing Tracking Number:

Deemer Date:

Submitted By: Lori Cwach

Filing Description:

2011 PreStandardized Medicare Supplement Annual Loss Ratio and Rate Adjustment Filing

This filing demonstrates loss ratio compliance and requests approval for the proposed rates.

SERFF Tracking Number: MUTA-126851527 State: Arkansas  
Filing Company: Mutual of Omaha Insurance Company State Tracking Number: 47003  
Company Tracking Number: LORI CWACH  
TOI: MS021 Individual Medicare Supplement - Pre- Sub-TOI: MS021.000 Medicare Supplement - Pre-  
Standardized Standardized  
Product Name: 2011 MOO PreStandardized Med Supp  
Project Name/Number: 2011 Annual Rate Filing/2011 MOO

## Company and Contact

### Filing Contact Information

Lori Cwach, Lead Actuarial Analyst Lori.Cwach@mutualofomaha.com  
Rating Department 402-351-4249 [Phone]  
Mutual of Omaha  
Mutual of Omaha Plaza  
Omaha, NE 68175

### Filing Company Information

Mutual of Omaha Insurance Company CoCode: 71412 State of Domicile: Nebraska  
Mutual of Omaha Plaza Group Code: 261 Company Type: Health Insurance  
Omaha, NE 68175 Group Name: State ID Number:  
(402) 351-2304 ext. [Phone] FEIN Number: 47-0246511  
-----

## Filing Fees

Fee Required? Yes  
Fee Amount: \$50.00  
Retaliatory? No  
Fee Explanation:  
Per Company: No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Mutual of Omaha Insurance Company	\$50.00	10/07/2010	40409818

SERFF Tracking Number:	MUTA-126851527	State:	Arkansas
Filing Company:	Mutual of Omaha Insurance Company	State Tracking Number:	47003
Company Tracking Number:	LORI CWACH		
TOI:	MS021 Individual Medicare Supplement - Pre-Standardized	Sub-TOI:	MS021.000 Medicare Supplement - Pre-Standardized
Product Name:	2011 MOO PreStandardized Med Supp		
Project Name/Number:	2011 Annual Rate Filing/2011 MOO		

## Correspondence Summary

### Dispositions

Status	Created By	Created On	Date Submitted
Approved-Closed	Stephanie Fowler	10/15/2010	10/15/2010

SERFF Tracking Number: MUTA-126851527 State: Arkansas

Filing Company: Mutual of Omaha Insurance Company State Tracking Number: 47003

Company Tracking Number: LORI CWACH

TOI: MS021 Individual Medicare Supplement - Pre-Standardized Sub-TOI: MS021.000 Medicare Supplement - Pre-Standardized

Product Name: 2011 MOO PreStandardized Med Supp

Project Name/Number: 2011 Annual Rate Filing/2011 MOO

## Disposition

Disposition Date: 10/15/2010

Implementation Date: 03/01/2011

Status: Approved-Closed

Comment: The requested rate increase has been approved to be implemented on or after March 1, 2011. This approval is subject to the following:

- Increases will not be given more frequently than once in a twelve-month period;
- The insureds shall be notified by the insurer of its intention to increase the rate for renewal not less than thirty (30) days prior to the effective date of the renewal.

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Mutual of Omaha Insurance Company	10.000%	10.000%	\$3,366	8	\$33,658	10.000%	10.000%

<i>SERFF Tracking Number:</i>	<i>MUTA-126851527</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Mutual of Omaha Insurance Company</i>	<i>State Tracking Number:</i>	<i>47003</i>
<i>Company Tracking Number:</i>	<i>LORI CWACH</i>		
<i>TOI:</i>	<i>MS02I Individual Medicare Supplement - Pre-Standardized</i>	<i>Sub-TOI:</i>	<i>MS02I.000 Medicare Supplement - Pre-Standardized</i>
<i>Product Name:</i>	<i>2011 MOO PreStandardized Med Supp</i>		
<i>Project Name/Number:</i>	<i>2011 Annual Rate Filing/2011 MOO</i>		

<b>Schedule</b>	<b>Schedule Item</b>	<b>Schedule Item Status</b>	<b>Public Access</b>
<b>Supporting Document</b>	Health - Actuarial Justification	Approved	No
<b>Rate</b>	2011 PROPOSED RATES	Approved	Yes

SERFF Tracking Number:	MUTA-126851527	State:	Arkansas
Filing Company:	Mutual of Omaha Insurance Company	State Tracking Number:	47003
Company Tracking Number:	LORI CWACH		
TOI:	MS02I Individual Medicare Supplement - Pre-Standardized	Sub-TOI:	MS02I.000 Medicare Supplement - Pre-Standardized
Product Name:	2011 MOO PreStandardized Med Supp		
Project Name/Number:	2011 Annual Rate Filing/2011 MOO		

## Rate Information

Rate data applies to filing.

<b>Filing Method:</b>	SERFF
<b>Rate Change Type:</b>	Increase
<b>Overall Percentage of Last Rate Revision:</b>	6.500%
<b>Effective Date of Last Rate Revision:</b>	03/01/2011
<b>Filing Method of Last Filing:</b>	SERFF

## Company Rate Information

Company Name:	Overall % Indicated Change:	Overall % Rate Impact:	Written Premium Change for this Program:	# of Policy Holders Affected for this Program:	Written Premium for this Program:	Maximum % Change (where required):	Minimum % Change (where required):
Mutual of Omaha Insurance Company	10.000%	10.000%	\$3,366	8	\$33,658	10.000%	10.000%

SERFF Tracking Number:	MUTA-126851527	State:	Arkansas
Filing Company:	Mutual of Omaha Insurance Company	State Tracking Number:	47003
Company Tracking Number:	LORI CWACH		
TOI:	MS021 Individual Medicare Supplement - Pre-Standardized	Sub-TOI:	MS021.000 Medicare Supplement - Pre-Standardized
Product Name:	2011 MOO PreStandardized Med Supp		
Project Name/Number:	2011 Annual Rate Filing/2011 MOO		

## Rate/Rule Schedule

Schedule Item Status:	Document Name:	Affected Form Numbers: (Separated with commas)	Rate Action:	Rate Action Information:	Attachments
Approved 10/15/2010	2011 PROPOSED RATES	H66, M101, M115, M133, M156, M3, M4, M6, MD42, 32CMO, 59CMO, 3562M, 3563M, 3564M, 3565M, 24310, 24311	Revised	Previous State Filing Number:  Percent Rate Change Request:	MUTA-126335223 AR RATE SUMMARY.pdf AR RATES PROPOSED.pdf 10.000

**MUTUAL OF OMAHA INSURANCE COMPANY  
PRE-STANDARDIZED MEDICARE SUPPLEMENT  
ARKANSAS**

<b><u>FORM</u></b>	<b><u>DATE APPROVED</u></b>	<b><u>REVISED RATE SCHEDULE</u></b>		
H66	08/30/1982	H66	AR BASE RATE	10/05/2010 0009
M101	09/19/1985	M101	AR BASE RATE	10/05/2010 0009
M115	12/05/1988	M115	AR BASE RATE	10/05/2010 0009
M133	12/05/1988	M133	AR BASE RATE	10/05/2010 0009
M156	05/07/1990	M156	AR BASE RATE	10/05/2010 0009
M3	06/08/1982	M3	AR BASE RATE	10/05/2010 0009
M4	02/13/1985	M4	AR BASE RATE	10/05/2010 0009
M6	06/08/1982	M6	AR BASE RATE	10/05/2010 0009
32CMO	05/21/1981	32CMO	AR BASE RATE	10/05/2010 0009
3562M (50VB)	09/25/1975	3562M (50VB)	AR BASE RATE	10/05/2010 0009
3563M (50VB)	09/25/1975	3563M (50VB)	AR BASE RATE	10/05/2010 0009
3564M (51VB)	09/25/1975	3564M (51VB)	AR BASE RATE	10/05/2010 0009
3565M (51VB)	09/25/1975	3565M (51VB)	AR BASE RATE	10/05/2010 0009
59CMO	05/21/1981	59CMO	AR BASE RATE	10/05/2010 0009
ATMSB	03/13/1986	ATMSB	AR BASE RATE	10/05/2010 00010
ATMSE	03/13/1986	ATMSE	AR BASE RATE	10/05/2010 00010
MD42	11/10/1986	MD42	AR BASE RATE	10/05/2010 0009



Schedule of Monthly Rates  
For Policy Form H66 - Arkansas

Attained  
Age  
65&Over 787.40

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Policy Form M101 - Arkansas

Attained Age	
65&Over	288.83

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Policy Form M115 - Arkansas

Attained Age	
65&Over	285.65

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Policy Form M133 - Arkansas

Attained Age	
65&Over	285.74

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Policy Form M156 - Arkansas

Attained Age	
65&Over	280.43

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Policy Form M3 - Arkansas

Attained  
Age  
65&Over 821.52

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Policy Form M4 - Arkansas

Attained Age	
65&Over	568.35

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Policy Form M6 - Arkansas

Attained  
Age  
65&Over 388.83

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.



Schedule of Monthly Rates  
For Policy Form MD42 - Arkansas

Attained Age	
All Ages	311.40

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Policy Form 32CMO - Arkansas

Attained Age	
All Ages	970.53

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Rider Form 3562M - Arkansas  
When Attached to Policy Form 50VB

Attained Age	
All Ages	248.91

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Rider Form 3563M - Arkansas  
When Attached to Policy Form 50VB

Attained Age	
All Ages	270.18

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Rider Form 3564M - Arkansas  
When Attached to Policy Form 51VB

Attained Age	
All Ages	248.91

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Rider Form 3565M - Arkansas  
When Attached to Policy Form 51VB

Attained Age	
All Ages	270.18

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Policy Form 59CMO - Arkansas

Attained Age	
All Ages	529.31

TO OBTAIN QUARTERLY, SEMIANNUAL, AND ANNUAL PREMIUMS, MULTIPLY THE ABOVE QUOTED PREMIUMS BY 3, 6, AND 12 RESPECTIVELY. FOR REGULAR POLICY ISSUES THAT ARE ON A MONTHLY PREMIUM PAYING BASIS, ADD \$2.00 TO THE TOTAL PREMIUM FOR THE POLICY AND ALL ATTACHED RIDERS. THE MONTHLY PREMIUMS FOR BANK SERVICE PLAN AND PAYROLL DEDUCTION ISSUES ARE THE PREMIUMS LISTED ABOVE.

Schedule of Monthly Rates  
For Policy Form ATMSB - Arkansas

Issue Age

65-69	157.25
70-74	157.25
75-79	157.25
80-84	157.25



Schedule of Monthly Rates  
For Policy Form ATMSE - Arkansas

Issue Age

65-69	593.91
70-74	593.91
75-79	593.91
80-84	593.91